

IN THE UNITED STATES DISTRICT COURT  
FOR THE SOUTHERN DISTRICT OF OHIO

BRIAN KEITH ALFORD

(ENTER ABOVE THE NAME OF THE PLAINTIFF IN THIS ACTION)

IF THE PLAINTIFF IS A PRISONER: PRISONER # A196744

vs.

DR. HANK ROSS CORRECTIONAL INST.

(ENTER ABOVE THE NAME OF THE DEFENDANT IN THIS ACTION)

IF THERE ARE ADDITIONAL DEFENDANTS PLEASE LIST THEM:

NURSE RAGLAND, ROSS CORRECTIONAL  
INST.

FILED  
RICHARD W. NAGEL  
CLERK OF COURT

FEB 27 2025 4:49 P

U.S. DISTRICT COURT  
SOUTHERN DISTRICT  
OF OHIO-COLUMBUS

2:25 CV 0187

JUDGE WATSON

MAGISTRATE JUDGE SILVAIN

COMPLAINT

I. PARTIES TO THE ACTION:

PLAINTIFF: PLACE YOUR NAME AND ADDRESS ON THE LINES BELOW. THE ADDRESS YOU GIVE MUST BE THE ADDRESS THAT THE COURT MAY CONTACT YOU AND MAIL DOCUMENTS TO YOU. A TELEPHONE NUMBER IS REQUIRED.

BRIAN KEITH ALFORD A196744  
NAME - FULL NAME PLEASE - PRINT

ROSS CORRECTIONAL INSTITUTION  
ADDRESS: STREET, CITY, STATE AND ZIP CODE

P.O. BOX 7010 CINCINNATI, OHIO 45601

TELEPHONE NUMBER

IF THERE ARE ADDITIONAL PLAINTIFFS IN THIS SUIT, A SEPARATE PIECE OF PAPER SHOULD BE ATTACHED IMMEDIATELY BEHIND THIS PAGE WITH THEIR FULL NAMES, ADDRESSES AND TELEPHONE NUMBERS. IF NO ADDITIONAL PLAINTIFFS EXIST CONTINUE WITH THIS FORM.

PAGE 2 AND 3 OF THIS FORM DEAL ONLY WITH A PLAINTIFF THAT IS INCARCERATED AT THE TIME OF FILING THIS COMPLAINT.

PREVIOUS LAWSUITS:

- A. HAVE YOU BEGUN OTHER LAWSUITS IN STATE OR FEDERAL COURT DEALING WITH THE SAME FACTS INVOLVED IN THIS ACTION OR OTHERWISE RELATING TO YOUR IMPRISONMENT? YES ( ) NO (X)
- B. IF YOUR ANSWER TO A IS YES, DESCRIBE THE LAWSUIT IN THE SPACE BELOW. (IF THERE IS MORE THAN ONE LAWSUIT, DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THE SAME OUTLINE.)

1. PARTIES TO THIS PREVIOUS LAWSUIT

PLAINTIFFS:

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DEFENDANTS:

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2. COURT (IF FEDERAL COURT, NAME THE DISTRICT; IF STATE COURT, NAME THE COUNTY)

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3. DOCKET NUMBER

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4. NAME OF THE JUDGE TO WHOM THE CASE WAS ASSIGNED

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5. DISPOSITION (FOR EXAMPLE, WAS THE CASE DISMISSED? WAS IT APPEALED? IS IT STILL PENDING?)

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6. APPROXIMATE DATE OF THE FILING OF THE LAWSUIT

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7. APPROXIMATE DATE OF THE DISPOSITION

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- A. IS THERE A PRISONER GRIEVANCE PROCEDURE IN THIS INSTITUTION?  
YES ☒ NO ☐
- B. DID YOU PRESENT THE FACTS RELATING TO YOUR COMPLAINT IN THIS STATE PRISONER GRIEVANCE PROCEDURE? YES ☒ NO ☐
- C. IF YOUR ANSWER IS YES:

1. WHAT STEPS DID YOU TAKE?

ICR, GRIEVANCE, APPEAL

2. WHAT WAS THE RESULT?

INADEQUATE INVESTIGATION

- D. IF YOUR ANSWER IS NO, EXPLAIN WHY NOT.

- E. IF THERE IS NO PRISON GRIEVANCE PROCEDURE IN THIS INSTITUTION, DID YOU COMPLAIN TO PRISON AUTHORITIES? YES ☐ NO ☐

- F. IF YOUR ANSWER IS YES:

1. WHAT STEPS DID YOU TAKE?

2. WHAT WAS THE RESULT?

PLACE THE NAME AND ADDRESS OF EACH DEFENDANT YOU LISTED IN THE CAPTION ON THE FIRST PAGE OF THIS COMPLAINT. THIS FORM IS INVALID UNLESS EACH DEFENDANT APPEARS WITH FULL ADDRESS FOR PROPER SERVICE.

1. DR. HANIK  
NAMES - FULL NAME PLEASE  
4545 FISHER ROAD SUITE D. COLUMBUS, OHIO 43228  
ADDRESS - STREET, CITY, STATE AND ZIP CODE
2. NURSE RAGLAND  
4545 FISHER ROAD SUITE D. COLUMBUS, OHIO 43228
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

IF THERE ARE ADDITIONAL DEFENDANTS, PLEASE CONTINUE LISTING THEM.



PLEASE WRITE AS BRIEFLY AS POSSIBLE THE FACTS OF YOUR CASE. DESCRIBE HOW EACH DEFENDANT IS INVOLVED. INCLUDE THE NAME OF ALL PERSONS INVOLVED. GIVE DATES AND PLACES.

DO NOT GIVE ANY LEGAL ARGUMENTS OR CITE ANY CASES OR STATUTES.

IF YOU HAVE A NUMBER OF DIFFERENT CLAIMS; PLEASE NUMBER AND SET FORTH EACH CLAIM IN A SEPARATE PARAGRAPH. USE AS MUCH SPACE AS YOU NEED. YOU ARE NOT LIMITED TO THE PAPERS WE GIVE YOU. ATTACH EXTRA SHEETS THAT DEAL WITH YOUR STATEMENT CLAIM IMMEDIATELY BEHIND THIS PIECE OF PAPER.

FROM 12-7-24 TO 12-10-24 PLAINTIFF COULD NOT URINATE AND REPORTED THIS FIRST SHIFT OFFICERS IN UNIT 1A AS WELL AS MEDICAL STAFF VIA STL TABLET AND HEALTH SERVICE REQUEST. ON 12-10-24 PLAINTIFF REPORTED TO MEDICAL, AND ADVISED MEDICAL STAFF HE COULD NOT URINATE SINCE 12-7-24 AND WAS IN SEVERE BACK AND STOMACH PAIN. DR. HAWK ADVISED NURSE RAGLAND TO CATHETERIZE PLAINTIFF AND NURSE RAGLAND REPLIED "I'M NOT CATHETERIZING HIM, PUT HIM IN THE BACK UNTIL HE PROVIDES A URINE SAMPLE". PLAINTIFF REMAINED IN A BACK OBSERVATION ROOM FOR 2 HOURS IN GREAT PAIN, YELLING AND PLEADING FOR ASSISTANCE UNTIL AROUND 10:10AM PLAINTIFF WAS CATHETERIZED. INITIALLY STRAIGHT BLOOD CAME OUT AND THEN MIXED WITH URINE, AND IT WAS ALLEGED HE HAD AN INFECTION [KIDNEYS, UTERI, BLADDER] AND PLAINTIFF WAS GIVEN A SHOT FOR PAIN, PLACED ON ANTIBIOTICS FOR FIVE DAYS AND ZIDROFEN BY DR. HAWK IN SPITE OF INFECTION, WHICH CAUSED PLAINTIFF TO PASS BLOOD CLOTS IN HIS URINE FOR ONE WEEK. ONE WEEK LATER, PLAINTIFF WAS PASSED TO

IN THIS SECTION PLEASE STATE (WRITE) BRIEFLY EXACTLY WHAT YOU WANT THE COURT TO DO FOR YOU. MAKE NO LEGAL ARGUMENT, CITE NO CASES OR STATUTES.

- (A) A DECLARATION THAT THE ACTS/OMISSIONS VIOLATED PLAINTIFF'S RIGHTS
- (B) A PRELIMINARY INJUNCTION AND TEMPORARY RESTRAINING ORDER
- (C) NOMINAL DAMAGES AUTHORIZED BY LAW AND DETERMINED BY JURY
- (D) PUNITIVE DAMAGES IN EXCESS OF \$1,000,000.00 AGAINST EACH DEFENDANT
- (E) A JURY TRIAL
- (F) PLAINTIFF'S COST
- (G) APPOINTMENT OF COUNSEL
- (H) ANY ADDITIONAL RELIEF AVAILABLE
- (I) A FILE STAMPED COPY OF THE COMPLAINT

SIGNED THIS 19TH DAY OF FEBRUARY 2025

Brian Keith Albord A196744  
SIGNATURE OF PLAINTIFF

VERIFICATION: I SWEAR UNDER PENALTY OF PERJURY  
THE INFORMATION CONTAINED HEREIN IS TRUE AND  
ACCURATE PURSUANT TO 28 U.S.C. 1746.

Brian Keith Albord A196744  
BRIAN KEITH ALBORD A196744



TO MEDICAL AND ADVISED BY DR. HAWK TO DISCONTINUE IBUPROFEN DUE TO SEVERE KIDNEY READINGS FOLLOWING LAB RESULTS. PLAINTIFF CONTINUED TO EXPERIENCE GREAT PAIN IN HIS BACK (KIDNEY AREA) AND SIDES, AND PROBLEMS URINATING WITH AN EXTENDED ABDOMEN AND PAIN. ON 12.23.24 PLAINTIFF WAS SENT TO MEDICAL AT 6:30AM AND DR. HAWK ADVISED PLAINTIFF'S READINGS WERE CRITICAL, AND HE WAS TRANSPORTED TO THE JAMES CENTER AT OHIO STATE UNIVERSITY HOSPITAL. PLAINTIFF ARRIVED AT OSU EMERGENCY ROOM AROUND 7AM WHERE HE WAS CATHED AND 2 LITERS OF FLUID/BLOOD REMOVED, WITH A FELL CATHETER INSERTED UNTIL JAN 5TH. FOLLOWING CT SCANS, BLOOD WORK IT WAS DETERMINED PLAINTIFF HAD KIDNEY, UTI AND BLADDER INFECTIONS, ADMITTED TO OSU FROM 12.23.24 TO 12.27.24 AND GIVEN ANTIBIOTIC DROPS, PAIN MEDICATION, WITH A LOSS OF 36 LBS FROM 186 TO 153 UPON ARRIVAL TO OSU ON 12.23.24. PLAINTIFF ALSO SUFFERED A BLOOD CLOT ON HIS LEFT LUNG, A CYST ON HIS LEFT KIDNEY,

5.)

AND PLACED ON BLOOD THINNERS FOR LIFE. PLAINTIFF RETURNED TO POSS CORRECTIONAL ON 12-27-24 AND WAS ADMITTED TO MEDICAL FROM 12-27-24 TO 1-2-25. DR. HAWK ADVISED PLAINTIFF AN INMATE HIS EARLY 300 WAS TREATED FOR AN AIR BORNE RESPIRATORY VIRUS WHICH CAUSED THE SAME CONDITION AS PLAINTIFF. TO DATE, PLAINTIFF REMAINS CATHETERED IN GREAT PAIN, WITHOUT PAIN MEDICATION, AND UNCERTAINTY ABOUT HIS FUTURE, DUE TO DR. HAWK'S AND NURSE RAGLAND'S NEGLIGENCE. THE 4 1/2 HOUR ON 12-10-24 WILL VERIFY THE NEGLIGENCE [KIT # 57339595] 12-19-24 TO MR. SZOKE-WARDEN'S ASSISTANT]. ON 1-31-25 DR. CARDARAC CONFIRMED THIS RECENT CT SCAN AT FMC A CYST ON LEFT KIDNEY, PRIOR INFECTION IN KIDNEYS, BLOOD RESULTS AND OTHER ISSUES.